

	California ISIS	Illinois	New Jersey	New Mexico	New York	Regional ITO WINDS	Texas WIN	Washington/ Puerto Rico
<b>General Characteristics</b>								
System/ Application Developer	In house by the State's information technology service division (ITSD)	Andersen	PDA	Wang	Deloitte Consulting	Wang	In house	Starling Consulting
System Architecture	<p>Mainframe</p> <p>DB2 for OS/390 developed using IBM's Visual Age Generator</p> <p>COBOL/CICS</p> <p>COBOL batch</p> <p>Centralized, real time system OS/390</p> <p>WICinfo</p> <p>Autodial extract, ISIS News Network</p> <p>Reports created in PowerBuilder. Has access to data on mainframe.</p> <p>QMF for Windows</p>	<p>Foxboro for DOS 2.6</p> <p>Runs under a windows shell – point and click</p> <p>The system is moving to Forte (DHS standard)</p> <p>Tables are in dBase at locals</p> <p>Main tables in dBase2 – sits on an AX Box</p> <p>Locals do end of day download and an upload at the beginning of the day</p> <p>Locals can inquire of the system at anytime of the day to gather information.</p>	<p>Uses an RS2000</p> <p>AS 400 processes data at PDA (the contracted processor)</p>	<p>Windows NT</p> <p>MS SQL Server database</p> <p>GUI interface developed in PowerBuilder.</p> <p>Distributed client server application. All levels see the same database and same application.</p> <p>The application is real time; there are no batch processes.</p> <p>The WIC application is an open database; anyone with the appropriate software and authorization can access data within the WIC application.</p>	<p>Windows NT Server</p> <p>Windows 98 Desktop</p> <p>Sybase 11 and Sybase Replication Server</p> <p>GUI Interface developed in PowerBuilder</p> <p>Fully distributed system. Local agency data is replicated real time to a central server.</p> <p>Centralized version of the application will be deployed in August 2002.</p> <p>Satellite site data is checked out in the morning and in in the afternoon. Full processing is available at these sites for users.</p> <p>Cobol batch programs handle bank and vendor processing.</p>	<p>Windows NT</p> <p>SQL database built through PowerBuilder.</p> <p>Satellite sites download a copy of the database to the laptop each day. The data entered or changed is uploaded to the server each night by all satellites.</p>	<p>State:</p> <p>Approximately 500 machines dial into the 16 modems of the OS2 box to transfer information. Each clinic/ LA is set to dial in at a particular time.</p> <p>Field:</p> <p>Clinics have access to FoxPro, but run DOS. Admin sites can access MSOffice applications through the Admin workstation, which has Windows 95. Clinics can access the Admin site through PC Anywhere to download data. Run Access, Visual Basic, C++</p> <p>Batch interface between State and Field systems (via phone line).</p>	<p>Microsoft (NT, 2000, etc.)</p> <p>Distributed database using SQLAnywhere. Single database product for CPS, clinics, mobile sites. Fully automated database synchronization provided by SQLAnywhere.</p> <p>Client/server interfaces for WIC central office, clinics, and mobile sites built with PowerBuilder.</p> <p>Web interface for consolidated reports using MS ASP.</p>
Technical Infrastructure Environment	<p>Approximately 4000 mainframe terminals (e.g., dumb terminals, laptops and informers).</p> <p>83 administrative PCs with 3270 emulation, 1 for each local agency.</p> <p>Laptops, informers, controllers, modems, printers (dot matrix, laser)</p> <p>RS/6000</p>	<p>Local workstations are networked.</p> <p>Sub sites use Reachout, a software package that connects them to the central site.</p> <p>Central Office has a server that collects data.</p> <p>Laser printers are used for reports.</p>	<p>250 desk tops and 250 notebooks in the field</p> <p>Windows 95/98 and NT 95/98</p>	<p>State host DEC Alfa</p> <p>Server</p> <p>Intel based</p> <p>128 M ram</p> <p>2 hard disks</p> <p>Taped backup capability</p> <p>PC Workstations</p> <p>233 MHz</p> <p>64 M ram</p> <p>2 G hard disk</p> <p>Laptops</p> <p>Laptop servers and workstations</p> <p>233 MHz</p> <p>128 M ram</p> <p>Printers</p> <p>Label printers</p> <p>Laser document printers</p> <p>MICR check printer</p>	<p>Approximately 1800 desktops and notebooks.</p> <p>Checks are printed real time at both permanent and temporary sites on MICR printers.</p> <p>Reports are printed on laser printers</p>	<p>Server</p> <p>In main office for fixed sites or on a laptop for remote sites, Pentium 400MHz, 96 MB memory, Minimum 2 IDE hard drives (each 1.6 GB minimum)</p> <p>Workstation</p> <p>Pentium 400 MHz, 32 MB Memory, Minimum 1.6 GB IDE hard drive</p> <p>Satellite Laptops</p> <p>Pentium 300 MHz, 32 MB memory, Minimum 1.6 GB IDE hard drive</p> <p>Printers</p> <p>MICR or non-MICR FI printer, Laser printer for reports, Desktop printer for each workstation (optional)</p>	<p>State</p> <p>NCR5100 backend DB server, Various workstations, MICR-enabled printers for printing checks on demand.</p> <p>Field</p> <p>330 networks with 2-10 machines each</p> <p>167 Standalones/170 laptops</p> <p>All hardware should support Windows. The issue would be installing the software.</p>	<p>Hardware:</p> <p>Low-end Intel servers, off-the-shelf Intel workstations, MICR-enabled printers for printing checks on demand.</p> <p>At pre-existing infrastructures (i.e. county health departments) WIC server provides data and application services with minimal impact on existing LAN. At new "WIC-only" infrastructures, the WIC server provides all LAN, data, and application services. Operations provides remote LAN and database support.</p> <p>Mobile sites supported by two models:</p> <p>1) Extended mobile used to checkout/check in from clinic database to laptop server.</p> <p>2) Independent mobile configures laptop as permanent server.</p>
Communications Approach	<p>SNA network</p> <p>FRAME Relay</p> <p>DSU/CSU</p> <p>FRADS</p> <p>TCP/IP</p> <p>FTP</p> <p>VPN/PPTP</p> <p>WIC is looking at wireless communication because it would prove helpful in remote locations, like migrant camps.</p> <p>California has implemented Virtual Private Network (VPN) and Remote LAN Dial (RLN) for dial up access to ISIS data for reporting and email services to all locations statewide.</p>	<p>LAN</p> <p>Dial up</p>	<p>All communications follow this path: Server @ RS 2000 @ AS 400</p> <p>There is no real time communication due to the lack of phone service.</p>	<p>Wireless capability exists, but is not widely used.</p> <p>State-owned WAN is a VPN using 56 KB frame relay.</p> <p>Remote sites plug into WAN from a fixed site to upload/ download data. If the remote workstation has not plugged into the WAN for 24 hours a reminder appears, but the reminder can be ignored.</p> <p>There is no dial in functionality in the WIC application.</p>	<p>LAN</p> <p>WAN</p> <p>Wireless - Satellite sites are fully supported by a wireless LAN. This temporary LAN is set up by users in under five minutes.</p>	<p>LAN</p>	<p>Dial in via phone line to download/ upload information between the State and Local Agencies.</p>	<p>Daily database synchronization can use multiple protocols:</p> <p>Washington State: Clinic servers automatically connect after-hours to local ISP for VPN exchange with the Central Processor Site.</p> <p>Puerto Rico: Clinic servers exchange messages on PRDH-managed private intranet using TCP/IP. Private intranet is also used for connection to Web server for consolidated reports.</p>

	California ISIS	Illinois	New Jersey	New Mexico	New York	Regional ITO WINDS	Texas WIN	Washington/ Puerto Rico
WIC system interface with separate health system	The Medi-Cal system is updated nightly in a batch process. WIC eligible participants are matched in ISIS to the Medi-Cal system by SSN. The Medi-Cal card can be swiped to access the Medi-Cal system and transfer basic information into ISIS.	This activity is performed through Cornerstone, the central health data collection program. Cornerstone provides common data screens that are used by a number of programs. There are eight separate programs with distinct modules that can access, input and receive client information. These programs are WIC, Family Case Management (public health nursing), Diabetes, Immunization, Breast/Cervical Cancer, Early Intervention (persons with disabilities – birth to age 3), Healthy Families and Healthy Start (low birth weight babies). Cornerstone is built in DOS, but uses "quick-pass", a software package, that allows the user to move around in the system.	There is no interface with separate health systems. It is expected that the interface may occur when EBT comes up and common information is on the smart card.	The WIC application has the ability to interface with other health systems, but this functionality is not currently in use.	The WIC system has interfaces for: CDC PedNSS CDC PNSS MEDICAID (currently inactive) FOOD STAMPS (vendors) FAN (Food and Nutrition Program dual enrollment) FAMS (Fraud and Abuse Management system)  All of these interfaces are currently batch.	There are no electronic interfaces.	There are no electronic interfaces.	No electronic interfaces are required in either Puerto Rico or Washington. Puerto Rico system collects immunizations and a daily batch update is under consideration.
Maintain automated interface with state immunization registry	There is no state immunization registry. The immunization program paid for a module to ISIS that tracks immunizations. WIC bills the counties for use of the ISIS module, which has become the closest thing to a state immunization registry California has.	This is done through Cornerstone. Both WIC and Immunization have access to these records.	There is no automated interface with the state immunization registry.	There is no automated interface with the state immunization registry. The WIC application does have this capability, though.	There is currently no automated interface with the NYS immunization registry.	There is no automated interface with the state immunization registry. The WIC application does have this capability, though.	There is no automated interface with the state's immunization registry.	Under consideration in Puerto Rico.
WIC system interface with other systems	FTP ISIS outstanding/ issued food instrument information nightly to State Treasurer's Office.  FTP food instrument redemption ("paid's") information nightly to the Department of Health Services to update ISIS.  CATS (Common Application Tracking System) Developed by Orange County. Pulls demographic information from ISIS for CATS use.	See Cornerstone description above.	There are no interfaces with other systems.	The WIC application has the ability to interface with other systems, but this functionality is not currently in use.	See DOH interfaces above.	The WIC application has the ability to interface with other systems, but this functionality is not currently in use.	There are no interfaces with other systems.	Washington: Banking Contractor and CDC  Puerto Rico: Banking Contractor, WIC bank (Banco Popular), CDC
Additional General Characteristics	Help Desk Functions/ Technical Support:  · Receive calls and open ticket (for tracking and follow up purposes) · Troubleshooting & Diagnosis of problem (hardware, software, application) · Solve Problem or · Escalate ticket to 2nd level support · Monitor ticket through resolution · Ability to provide reports regarding downtime of clinics; outages, both statewide and local; causation of problem; identification of chronic issues, both hardware and software							N/A
<b>Certification and Enrollment</b>								
Client registry (i.e., a common set of data elements used by multiple agencies)	WIC shares information with CATS (Common Application Tracking System) (online) and a statewide client index system (batch process).	Last name, first name, middle initial, date of birth, sex (soundex) The ID number is 14 digits, with the last two being tiebreakers.	WIC does not share information with other agencies.	The WIC application is an open system so there is not limit to what data elements can be accessed across programs.	In New York the WIC data is not shared across agencies. We do however maintain a table for dual enrollment purposes which could be used for this purpose. It contains, Last Name, First Name, DOB, SSN, and Sex, along with the participant's 18 digit ID number.		There is no client registry across Texas	No sharing of information with other agencies in Washington and Puerto Rico.
Other client data match capabilities	Clinics can search within the WIC application for possible participant matches.	Staff attempt to capture Social Security Numbers, but cannot require a client to provide this information.	There are no client data match capabilities.	Clinics can search within the New Mexico WIC application for possible client matches. The WIC application currently does not use functionality to search across programs for client data, though the capability is built into the application.	A screen within WICSIS allows for client searches against the values mentioned above. Client pre-screening will automatically do this search statewide. Matches are displayed for acceptance or rejection.		The WIN system matches client information at the State level every night after uploads from the local agencies. Any matches are then downloaded to the locals the next day.	New records are matched by name and social security number.

	California ISIS	Illinois	New Jersey	New Mexico	New York	Regional ITO WINDS	Texas WIN	Washington/ Puerto Rico
Maintain history of Applicant or Client	ISIS maintains history on enrolled applicants and participant history. But when there is a lapse of participation, (i.e., disqualification) a new record is created if the participant re-enrolls. These histories have never been purged.	Maintains client history only.	Client data is archived and purged once the client has left the program. Child records are purged after 3 years and women records are purged after 5 years.	The WIC application maintains applicant and client history. These histories have never been purged.	Maintains history on all applicants and clients as well as their family and household members. These histories have yet to be purged.		The WIN system does not maintain a history of applicants and much client data needs to be reentered at each appointment.	All client information collected is maintained and available.
System generated WIC ID number	ISIS generates unique family and individual identification numbers consisting of 11 characters. The ID numbers are based on first and last name initials and a date algorithm.	The system generates a 14-digit identification number.	The ID is computer generated. There are unique identifiers for both the individual and the family.	The WIC application generates a WIC ID number.	The system generates a WIC ID number, a family ID number, and a household ID number.	WINDS does not generate WIC ID numbers. Each clinic has a unique numbering approach. An edit is in place to catch if an existing ID is entered for a new certification.	Texas WIN generates a temporary Family ID (FID) to hold basic information that is collected during quick intake. This number begins with a 9 and is never given to the applicant; it is not a certified FID.  When a client becomes certified, the permanent FID and Client ID (CID) are system generated.	System generates a unique WIC ID for each client and family group. The client ID is retained when transferring from clinic to clinic.
Capture client demographic data	Basic demographic data are collected and stored, which include first and last name, DOB, mother's FIRST name, ethnicity, gender, and address. SSN, Medi-CAL number, and driver's license number are collected, if available. When an applicant is enrolled, ISIS uses basic demographic data to search for a match (i.e., potential dual enrollee). The Department of Health Services (DHS) requires the place of birth to be collected (county if in CA, state or country). Birth name is also collected for DHS.	Client demographics are captured in Cornerstone. One enrollment screen captures sex, race, ethnicity and languages spoken.	Only client demographic data required for WIC is collected.	Client demographic information is captured and stored for later retrieval.	Basic demographic data are collected and stored. These elements include first and last name, DOB, family relationships, ethnicity, gender, and residential and mailing address, SSN, homeless status, DOB, schooling completed, phone number, etc.	Basic demographic data is captured on the DEMOGRAPHICS tabs. It is automatically filled in when the record is accessed. If a SSN is available, it is entered.  When the ZIP code is entered, the system automatically fills in the city and state.	The system captures client demographic data, but it needs to be reentered at each appointment.	Clients are grouped by family.  Family information: caregiver, alternat signatory, physical address, postal address, telephones, interpreter needs, special requirements (wheelchair, etc)  Client information: name, gender, birth date, SSN, primary and secondary ethnicity, explicit link between infant and mother who is a WIC client
Capture anthropometric data	Anthropometrical data is captured and stored. Blood test cannot be performed at California clinics. Clinics have 90 days to get the information from doctors. Height and weight data can be captured in the clinic if necessary.	Anthropometric data is captured by Cornerstone on the health status screen. WIC will use the blood work data provided 60 days have not passed since the blood was drawn.	Client anthropometric data required for WIC is collected.	Client anthropometric information is captured and stored for later retrieval. This information is not overwritten, so historical data can be used for analysis over time.	Anthropometrical data is captured and stored.  The system includes growth charts to visually plot anthropometrical data over time.	Anthropometric data is captured and stored in the Medical Information section of the MEDICAL/ CARE PLAN tab.  Changes in anthropometric data that could be risk factors are highlighted in green.	The system captures anthropometrical data, but it needs to be reentered at each appointment.	Weight, height, length and head circumference. Hematological (hct and hgb)  Puerto Rico collects biochemical (cholesterol, albumin, glucose, and blood pressure).
Nutritional risk code determination	Risk factors are entered into ISIS. ISIS uses risk factor codes to provide a summary of nutritional needs and priority level. A Competent Professional Authority uses this information to determine eligibility.	Manually determine nutritional risks from health assessments located on the health screens in Cornerstone.	The system automatically assigns risk codes based on entered data.	Nutritional risk codes can be assigned by the WIC application. The nutritionist can overwrite these codes, if necessary. Other risk codes are assigned by the WIC application and cannot be changed unless client data (that has been inputted) changes. The nutritionist can enter any additional risk codes.	The system automatically assigns applicable risk codes and a qualified CPA can make manual risk assignments as well.	Risk factors can be objective (system assigned based on inputted anthropometric data and dietary recall summary data) or subjective (additional factors assigned by the nutritionist).  High risk factors are highlighted red by the system.	The nutritionist determines nutritional risk codes. The codes are then entered into WIN to determine the client's priority.	Auto-calculation of measurement based risks using BMI. Manual determination of dietary risks.  Risk factors can be coded as High Risk. Nutritionist may also assign Professional Discretion High Risk.
Family unit linkage and adjustment	Family linkages are determined by use of the Family ID. Family information and linkages can be adjusted by Competent Professional Authorities.	System adjusted during certification to set up families for future common certification dates and for education classes.	The system allows the local to link family members together. It allows the local to track nutrition education contacts separately and as a family.	Family linkages can be created and updated in the WIC application. Any staff that are authorized to edit the particular records can create and update family linkages.	Family linkages are made through a common family ID. Inter-family and intra-household transfers can be accomplished using WICSIS. WICSIS has the capability of scheduling family appointments, completing family nutrition education visits, and issuing family checks.	Family linkages are set up at enrollment (add an infant through the "infant box" on a mother's record) or later (there is a button in the FAMILY box to ADD DEPENDANT).  The system administrator can easily change family linkages.	Family linkages are determined by use of the Family ID. Family information can be adjusted.	All clients are associated with family groups. Infants are explicitly linked to WIC client mother, even if in a different family.  Appointment book is family based. Clients can be moved from family to family, or split off to form a new family.
Check for Dual Participation (DP)	After entering basic information on to the WIC screen, ISIS pulls up a list of possible WIC matches. Data elements compared include: WIC ID, name, SSN, CA driver's license number, Medi-Cal number, mother's first name, address, agency, clinic, and cert end date. Clinic staff can either select an existing record or, if there is not a match, create a new person.	Dual participation is checked after certification by matching names and unique ID numbers.	The system checks for dual participation after certification at the central office. It uses DOB, names, authorized representative, gender, and the mother's maiden name as search criteria.	Dual participation is done at the state level. Staff can do a search based on up to 75 parameters. If a DP check has been run, certain records are flagged. Clerks follow up on flagged records that are potential matches. If a DP check has not been run, potential DP records are not flagged. The WIC application has the capability to import data from other programs, but this functionality is not currently being used.	After entering basic information in to the WIC pre-screen, WICSIS pulls up a list of possible WIC and FAN (Food and Nutrition Program) matches. Data elements compared include: first and last name, SSN, DOB, address. Clinic staff can either select an existing record or, if there is not a match, create a new person. Data is not inserted into the system if the user chooses to proceed with an existing record.	Dual participation is checked after certification based on name, DOB, SSN and mother's maiden name.  Dual participation across clinics is accomplished via a dual participation report that is placed on disk and sent to other clinics.  The system checks for infants linked to a mother when a new infant is added to make sure the same infant is not certified twice.	Records that represent possible dual participants are locked while local staff conduct research. The administrative site provides an unlock key when it has been determined that the client is not a dual participant.	Puerto Rico: System maintains a Client Current Site Registry at each clinic, which holds a subset of information about all clients in the program island-wide. The Registry is checked for each new client by names and SSN.  Washington and Puerto Rico: Dual Participation report at the WIC central office.
Automated adjunctive eligibility determination	There is an interface between ISIS and the State's Medi-Cal data system which contains data about eligibility for Medi-Cal, TANF, and Food Stamps. Users are required to use this interface to verify adjunctive eligibility when the applicant is not income eligible. If the applicant is income eligible, the interface can be used optionally.	The system does not automatically match with another program to automatically determine adjunctive eligibility. Medicaid is checked to see if the person is a participant, and then is manually made adjunctively eligible	There is no connection for automated adjunctive eligibility determination.	The WIC application automatically determines an applicant's adjunctive eligibility when participation in FSP, TANF, or Medicare is entered. The WIC application overrides income criteria is an applicant is deemed adjunctively eligible.	An interface with NYS Medicaid has been defined but is not in place. For now, all adjunctive income data must be entered and approved by the user after manually checking the source.	Users enter services (like FSP) in the services field or through the income calculator and eligibility is automatically determined.	Staff complete Yes/ No fields about participation in other programs, but the system does not automatically determine adjunctive eligibility.	The Income Eligibility display allows for full adjunctive eligibility.

	California ISIS	Illinois	New Jersey	New Mexico	New York	Regional ITO WINDS	Texas WIN	Washington/ Puerto Rico
Automated income calculation and income eligibility determination	The family certification screen includes an income calculator. If an applicant is adjuctively eligible, clinic staff can proceed if income is too high. If the applicant is not adjuctively eligible and the income is too high, certification cannot proceed.	Eligibility is determined from a manual monthly calculation of the annual income that is found in Cornerstone.	There is an income calculator that automatically compares reported income data and household size to Federal guidelines and determines eligibility. The income calculator can be overridden for adjuctively eligible applicants.	The WIC application includes an income calculator and automated income eligibility determination functionality.	WICSIS will automatically calculate income based on reported income data and based on household size compare that calculated total to federal guideline for eligibility determination.	The income calculator figures monthly income and adds an adjunctive eligibility indicator, services used entry, and comment, if applicable.	Income is calculated and verified by staff. Staff also determine income eligibility.	The Income Eligibility display automatically calculates income eligibility. Display can calculate eligibility from both multiple wage earners and intermittent income.
Linkage of dietary assessment to risk factors	After the applicant completes the 24-hour recall, the nutritionist analyses it and selects all applicable dietary risk codes (D codes).	Dietary assessment is determined through a 247hour recall, a food frequency, or a diet history. One answers "yes" or "no" in the computer that then determines the risk.	The dietary intake will automatically determine nutritional risk once values are manually entered.		A summary of the dietary recall report is entered into WICSIS. Based on this summary WICSIS will automatically assign risks or the CPA can choose risks to be generated.	A summary of dietary habits is entered in the Food Group area of the MEDICAL/ CARE PLAN tab from the 24-hour recall form. The client fills out the 24-hour recall form prior to meeting with the nutritionist.	Nutritionists, not WIN, link dietary assessment to risk factors. The risk factors are entered into WIN at the end of the certification process.	Nutritionist manually assigns risk factors.
System generated WIC ID card	The system does not generate an ID card, but does generate a number that manually placed on an ID folder.	No. The ID card is completed manually and includes much information, including the proxies.	The system does not generate an ID card, but does generate a number that manually placed on an ID folder.	A bar code with the Family Group ID is printed on the label printer and affixed on card stock. This ID is used only in the clinic to quickly enter client data at appointments; it is not used as participation verification.	The system generates a WIC ID card and the user can print it through the application. If lost, it can be reissued anytime during the active certification period.		The system generates a WIC ID card with a bar code.	Neither Washington or Puerto Rico require a system generated WIC ID card.
Process transfer	Because ISIS is a centralized system, if state transfers are easily processed.	Transfers are processed overnight. The individual's information is downloaded to the gaining local agency.	Clients transferring within state call for an appointment. Their records are transferred from the State's database, but it takes three days to complete the process.	In State Transfers: Client goes to NEW clinic. Clinic clerk does a search on all clients and initiates the transfer. Client's data is sent to the receiving clinic automatically.  Out of State: Receiving clinic uses VOC to enter the client as a new New Mexico client. The record is flagged as an out of state transfer so that the clerk can manually determine certification end date.	Transfer is completed overnight after the client has requested transfer. When the system is centralized in mid 2002, the transfer process will become real time.	Transfers out are handled simply by entering the state to which the client is transferring.	Receiving clinics enter the FID and CID(s) of clients whose information they want transferred to their site. The state then downloads this information.	The system maintains a Client Current Site Registry at every clinic that holds a subset of information about all clients in the program. Enough information is available to transfer in the family group and issue checks. Full records are automatically requested and downloaded within 24 hours.
System generated verification of certification (VOC)	ISIS provides information for manual completion of the VOC (out of state). In-state transfers do not require a VOC.	The VOC cards are created manually.	The system produces one VOC document for a participant per certification period.	The VOC is generated from the WIC application.	VOC in state and out of state cards are generated by the system automatically when the user transfer is being processed. The card is printed and handed to the participant during their visit.	The system prints a VOC for transfers.	The system prints a VOC for transfers.	System generates VOC on demand.
Additional Certification and Enrollment Characteristics	The WIC application automatically determines certification period based on program category. Staff can also manually determine certification period (e.g., for incoming out-of-state transfers). The ISIS application automatically determines certification period based on program category. Staff can also manually determine certification period (e.g., for incoming out-of-state transfers).  The ISIS application provides a summary of the participant's nutritional status, intervention level, basic demographic data, and all indicators of nutritional need. This summary plays an important role in the nutrition counseling as ISIS determines the intervention level that allows staff to easily identify high risk needs.		Objective information from SOAP notes (from anthropometric and hematological data and risk factors) is automatically entered, retained indefinitely, and transferred with the client.	The WIC application automatically determines certification period based on program category. Staff can also manually determine certification period (e.g., for incoming out-of-state transfers).  The WIC application can automatically update client status. Clients are automatically terminated when certification expires. If checks have not been picked up for 2 consecutive months, the client's status is automatically changed to terminated. Staff can manually change termination status.  The WIC application does not require that certification data be gathered in any particular order, but certification cannot be completed until all required data are gathered.	The WICSIS application automatically determines certification period based on program category and applicable time frames.  The certification subsystem offers a couple of unique features:  A Participant Overview screen allows the user to review a client's appointment, benefit, nutrition education, risk, and certification history.  An Enrollment History screen allows a user to look at participant data as it was at the time of certification.  High risk assignments at the time of enrollment automatically generate High Risk Care Plans for clients.			System uses WIC service "wizards" that guide clinic staff through standard services provided to clients (i.e. New Certification, Health Assessment, High Risk Care Plan, etc.) greatly facilitating ease-of-use and shortening system learning curve for new staff.
<b>Nutritional Education</b>								
Track Nutrition Education (NE) offered	Nutrition Education is tracked in the client's record.	Yes. Nutrition Education is tracked on the system.	The system tracks whether a participant refuses to attend a nutrition education class.	NE offered is tracked in the WIC application using general client notes of class name reports.	Nutrition Education is tracked in the client's record. This includes, course offered, handouts received, videos viewed, nutritionist giving service, notes date, referrals made, topics covered. Most data is automatically assigned when a client is checked in for a visit. The user has the option of modifying the assigned values as necessary if the visit has been in some way custom.	Record NE offered on NE/ CONTACTS screen. Comments can be added here for other clerks to see (e.g., do not issue checks until height/ weight is taken). The system also maintains information on pamphlets/ materials provided.	NE offered is not tracked.	Clinic staff can schedule classes, register specific clients (or caregivers) for the class, and collect attendance information. Classes are integrated with the appointment book. Batch checks can be run for class participants.
Track NE attended	When a participant receives nutrition education, it is documented in their record.	Yes. When a client attends a nutrition education class, it is noted in the client's record.	The system lists nutrition education classes in the client's record.	The WIC application tracks attendance in NE classes. When a client attends a class the class name becomes BOLD in the family care plan.	When a participant receives nutrition education, it is documented in their record.	Nutrition goals are captured in comments.	WIN lists the nutrition education classes attended in the client's file.	Attendance is recorded.

	California ISIS	Illinois	New Jersey	New Mexico	New York	Regional ITO WINDS	Texas WIN	Washington/ Puerto Rico
Track NE topics covered	Local Agencies can track NE topics by using state-defined codes or codes created by the Local Agency via online administration function.	Yes. The topics that are presented to the participant are tracked in her record.	The topics covered are listed in the clients' record.	Staff can track topics covered by using general client notes or by reviewing names of classes attended.	Yes, see above. Topics are covered in great detail.		Each nutrition education class's subject has a code that is entered into the client's file.	Formal classes are identified with topic. Nutritionist can record topics discussed informally as well.
Record breastfeeding history	Breastfeeding history is tracked in the infant's and mother's record. It tracks weeks and whether the infant is currently breastfeeding.	Yes. The system records the amount of breastfeeding done by the mother.	Breastfeeding (BF) history is listed in the clients' records. Data recorded are: - Ever BF? - BF now? - % of BF - Reason stopped - Date Ended - Age formula introduced	Breastfeeding history is kept in the WIC application. There is a linkage between the mother and the infant records so that data can be viewed from either source. Data captured include initiation duration, reason for stopping, number of cans of formula received (if partially breastfed).	Breastfeeding is tracked for breastfeeding women, pregnant women, postpartum women, infants, and children. Intake is custom tailored to category.  For instance, Pregnant Women are asked only their feelings about breastfeeding while a breastfeeding woman will be asked:  - Breastfeeding at discharge? - Current breastfeeding status? - How long between feedings? - Postpartum women are asked BF duration etc.		Breastfeeding data are collected for women (previous BF, Interest in BF, an exclusive BF) and for infants (currently BF, date ended BF).	Breastfeeding history is recorded for both the mother and infant.
Records care plan	Nutritionists create a care plan based on risk factors and interviews with the participants. An automated comments module is used to record nutritional and health goals and care plan. The care plan and comments can be updated and printed.	Care plan is documented in the "notes"	Care plans are recorded in the SOAP notes.	Nutritionists create a care plan based on risk factors and interviews with the client. The comments section is used to record nutritional and health goals. The care plan is established for a family and can be updated and printed.	Yes. Pre-defined care plans are automatically defined based upon assigned high risks. The system also allows for the creation of custom care plans allowing users to write their own interventions and follow-ups or choose from approved State items. Care plan progress is tracked by the system and users are given reminders by WICSIS to visit the care plan during a nutrition education visit.	There is no pre-determined care plan set up in WINDS. Individualized care plans can be developed and printed.	WIN does not record nutrition education care plans at this time.	Care plans may be created for each client using the Flowsheet display. The appointment book defaults new appointment types based on corresponding care plan events.
Additional Nutrition Education Characteristics	The system ensures that high risk participants are identified based on an indicator of nutritional need (risk). ISIS assigns an intervention level which indicates the appropriate staff to provide nutrition education: CPA, RD, or MNT-RD. ISIS also has fields to record the type of nutrition education provided and the participant's nutrition education (care) plan.		The system ensures that nutrition education was provided, at least one referral was made, and that a SOAP note was created before a certification is valid.		WICSIS allows for easy scheduling and automated recording of the results of a group nutrition education contact.  WICSIS care plans are very flexible and comprehensive allowing users and clients to track goal accomplishments between visits.			
<b>Health Surveillance</b>								
Record health care referrals	The referrals screen allows staff to indicate that the consent to share information was signed, to document the referrals made, and to remind clinic staff to discuss voter registration.	Yes. There is a referral screen and also a provider screen.	The system ensures that referrals were made.	The WIC application records referrals to WIC as well as to other programs.	The referrals screen allows users to both record referrals to WIC and referrals from WIC.	WINDS records health care referral data.	WIN records referrals to WIC as well as referrals to other programs.	System records both referrals to other services, and also how clients were referred to WIC.
Record referral follow up	The system does not track referral follow up.	Yes. The system allows the worker to record any follow-up actions taken on referrals to other programs.	The system does not track referral follow up.	Clerks follow up on referrals by contacting agencies to which a client was referred to learn the status of the referral. The clerks enter this information into the WIC application.	Notes can be entered concerning referrals.	The system does not track referral follow up.	The system does not track referral follow up.	Neither Washington or Puerto Rico requires referral follow up.
Create automated growth charts	ISIS does not display plotted growth charts, but does calculate and display growth percentiles for infants and children and prenatal weight gain status and recommended weight gain for women.	No. There are plans for automated growth charts in Cornerstone II.	The system generates on-screen and printable growth charts. Chart types include: length for age, weight for age, weight for length, premature length, premature weight for age, and premature length for age.	The WIC application can generate growth charts based on client data entered into the application. The chart is printable and shows trends over time.	The system generates on-screen and printable growth charts. Chart types include: length for age, weight for age, weight for length, BMI, among others.		WIN does not produce automated growth charts.	System automatically generates plotted growth charts, including current and historical measurements.  System has been upgraded to BMI for Puerto Rico.
Maintain automated dietary history	ISIS only records dietary inadequacies. It does not record 24-hour recalls or dietary histories.	This is done manually.	Dietary history data is maintained across certifications.	The WIC application maintains the dietary history for later review.	WICSIS maintains dietary history across certifications. It also carries forward some health and dietary information for ease of entry during a subsequent certification.	WINDS maintains food group serving data.	WIN does not maintain a dietary history. The system can tell at a point of time what the dietary situation of a client is.	System does not record dietary history.
Track immunizations	ISIS captures shot history data (shot dates entered by WIC staff from immunization record). An algorithm determines the status of the client and what is due soon.	Yes. There is a separate immunization program located on Cornerstone that can be accessed and updated by the worker.	The system tracks immunizations for WIC clients. Also, the need for immunizations of clients is highlighted on the screen.	The WIC application has a YES/NO field labeled "Are immunizations up to date" to track immunization status.	WICSIS captures whether immunizations are up to date.	WINDS only captures whether immunizations are up to date in a YES/NO field.	WIN captures immunization information in detail. WIN tracks date, series, lot number, manufacturer.	Puerto Rico records immunizations using the system. Immunization screen can be configured by WIC staff for new immunization types & schedules.

	California ISIS	Illinois	New Jersey	New Mexico	New York	Regional ITO WINDS	Texas WIN	Washington/ Puerto Rico
CDC surveillance- (women, pediatric)	There is no electronic interface with CDC for surveillance reporting.	Both pediatric and pregnancy.	The system collects data for USDA Participant Characteristics, CDC Pregnancy Nutrition Surveillance System (PNSS), and CDC Pediatric Nutrition Surveillance System (PedNSS).  The system transmits the USDA file to USDA from the central processing site according to USDA requirements.  The system transmits the PNSS and PedNSS to CDC according to CDC requirements.	Information for CDC surveillance report are extracted from the WIC application and electronically submitted to CDC.	Both PedNSS and PNSS data are collected and transmitted to the CDC.		There is no automated transfer of CDC surveillance information from WIN.	Puerto Rico system collects full pediatric and prenatal nutrition surveillance data with each certification and re-certification. Operations staff create extract files for transmission to CDC.
Capture medical history	ISIS has the ability to capture medical history, such as diabetes, etc.	Captured medical history is archived after no activity for five years in any of the Cornerstone Programs.	Health history that could lead to determining nutritional risk is captured. Other health problems are not.	Clients provide medical history information, which is maintained in the WIC application.	Extensive medical history can be captured through WICSIS. Major categories include, smoking, drinking, medical problems, household conditions, etc. All are captured through easy to use multi-select windows. Verification is recorded as necessary based on table driven parameters.		WIN does not capture medical history.	System captures limited medical history that is pertinent to WIC. Staff may record additional medical history in case notes.
Capture health care provider	ISIS captures the physician's name and phone number.	Health care provider information is captured.	The health provider is captured under a screen entitled "Medical Home".  The local agency staff can enter an HMO, medical group, doctor's name, etc.	Health care provider information is captured.	Insurance information is captured. Provider information can be captured in participant notes.		WIN does not capture health care provider.	System records primary health care provider name and address.
Additional Health Surveillance Characteristics				For pregnant women, due date is automatically calculated based on date of last menstrual period or number of weeks into pregnancy.  Pregnancy outcome is captured.	Special needs formula use is captured along with prescription information. This is then used to automatically adjust the client's food package.  Health intake is customized by category assuring that the correct questions are asked of each different type of client.			
<b>Food Benefit Issuance and Payment</b>								
Create tailored food instruments	ISIS allows users to delete food items from the food package. This tailoring can be set for a certain number of months or for all months.	Between 1 and 900 Food packages are available to assign. The packages are in the system, but the nutritionist must make a determination of which package should be used and specifically assign to the participant.	The system uses default food packages but allows for total customization. The system automatically checks for compliance with USDA maximum quantities for food categories per WIC status.	Nutritionists can add or delete food items or change the quantity of a food items prescribed for any pre-established food package.	All default food packages are tailorable within the boundaries of the USDA maximum food quantities. The system automatically chooses the correct default package based upon the client's profile. This package can then be custom tailored by the nutritionist.	Nutritionists can create new food packages or delete foods from an existing package.	WIN cannot create tailored food instruments from scratch. Instead, there are various food packages with varying amounts of food that can be provided a client.	System pre-tailors food packages which can be configured by WIC staff. Food packages can be spread across multiple sets of food instruments.
Create standard food packages based on risk factors or category	ISIS does recommend food prescriptions based on the category and nutritional risk factors. The nutritionist has the ability to accept or reject the suggestion. There are 3 - 4 possible food package options for each category.	This is done, but manually.	Default food prescriptions are set up in the system. The system automatically creates a new food prescription for the addition of juice or cereal based on the infant's age and clinic policy.	Standard food packages are created based on both risk factor and category. Food packages can be automatically updated for category adjustments (e.g. when an infant becomes old enough to require cereal the food package will automatically include it).	Standard food packages are created based upon category, age range, breastfeeding status, homeless status, and special needs status. As a client's profile changes WICSIS will automatically assign a new default package.	Nutritionists issue standard food packages based on risk factors or category.	WIN utilizes standard food packages	Pre-tailored food packages are associated by WIC staff with one or more client categories, and may be associated with one or more risk factors.
Track special and non-contract formula	Special formula is provided through direct distribution. Non-contract formula is issued through checks in the ISIS. Both types of prescriptions are tracked through ISIS.	No, the system does not capture this information.	The system will capture information on special formulas. The state does not allow non-contract formula to be provided.	If a non-contract or special formula is given, the WIC application tracks the type of formula given and the reason for providing the special formula (e.g., doctor's prescription).	WICSIS tracks special formula prescriptions and allows the substitution of special formulas into the default food package while a client's prescription is active. Prescriptions are tracked for women, infants and children.		The WIN system can track both special and non-contract formulas issued.	Staff may include special and non-contract formulas in pre-tailored food packages. Vendor pricing includes prices for special and non-contract formula.
Generate food instruments (FIs)	Food instruments are printed from ISIS. Some agencies choose to print FIs in advance.  ISIS allows users to place a HOLD on food instruments. This is beneficial when the client has to do something (like bring in blood work from the doctor) before receiving the FI.	Yes - all on demand at the locals.	Food instruments are generated on demand, though the system could create them in a batch mode. Food instruments can be printed on local or remote machines.	The WIC application generates food instruments.  Users can place a HOLD on printing if the client is required to take some action before receiving food instruments.  Staff can print FIs by individual, by family, or by class.	Food instruments are printed on demand on a MICR printer.	WINDS prints FIs on demand at clinics on blank, watermarked stock.	WIN generates Food Vouchers on demand and in batch processes.	System generates food instruments on demand using MICR-enabled laser printers on blank safety paper. No pre-printed sequentially numbered inventory is used. Batch printing also available using the same technology.
Print food instruments for multiple months (double or triple issuance)	FIs can be printed for multiple months.	The default is to print FI's for 3 months with the ability to reduce by individual or local server.	The system supports issuance of food instruments for multiple months.	FIs can be printed for any number of months (up to the entire certification period). The standard default is 1 month, but clinics can change their default.	FIs can be printed for up to a three month issuance based upon the issuance cycle assigned to a participant. That issuance cycle is easily adjusted.		Food instruments can be printed for multiple months. Local Agencies can set the clinic default to issue 1, 2, or 3 months at a time.	Bi-monthly in Washington, Tri-monthly in Puerto Rico.

	California ISIS	Illinois	New Jersey	New Mexico	New York	Regional ITO WINDS	Texas WIN	Washington/ Puerto Rico
Print vendor- specific food instruments	All FIs in California are vendor specific. Only homeless clients can receive FIs for any authorized vendor.	The system does not issue vendor specific food instruments.	New Jersey is not a vendor specific state.	The system does not issue vendor specific food instruments.	WICSIS does not issue vendor specific checks as NYS is not vendor specific.	Fis can be vendor specific or AAV. At certification, clients have to indicate if they plan to shop at only one vendor.	The system does not issue vendor specific food instruments.	Washington requires vendor specific. Puerto Rico is any authorized WIC vendor.
Provide Federal food package guideline edits for food instrument sets	ISIS does not edit for food package amounts. There is no need since all food packages are preset to meet these guidelines.	Federal changes are made at the center office.	The system automatically checks to ensure compliance with USDA maximum quantities for food categories per WIC status.	The WIC application does not include any food package guideline edits.	The system automatically checks to ensure compliance.		WIN does not edit for Federal food package amounts. There is no need since all food packages are preset to meet these guidelines.	Food package creation is constrained by federal food package guidelines.
Issue aggregate family package	ISIS does not aggregate family food packages. Family based food packages are under development.	All food packages are for individuals - can coordinate issuance and pick-up of all family members at one time.	Instruments are issued for each family member, but they can all be issued at the same time.	The WIC application cannot issue aggregate family packages.	WICSIS does issue aggregate family checks allowing for easier use at the vendor for clients.		WIN cannot issue aggregate family packages.	System does not allow for "family food packages." However, checks can be issued for one or more family members in a single transaction.
Automatically reduce food item quantities for late food instrument pickup	The food packages provided are always given at the maximum level. The nutritionist does have the ability to tailor the package for various reasons.	System automatically reduces the food package for late pick-up.	The system automatically prorates the food package after the seventh day of the month.	The WIC application provides an alert if a food package is being issued mid-month that reminds clerks that a reduced package could be issued. Clerks can choose a ½ package or issue the full package.	WICSIS automatically prorates food instruments when the user is more than 1 week late for pickup. This proration can be overridden at the discretion of the user.	Nutritionists can set up partial food packages (½ month or ¼ month) with reduced quantities.	WIN does not automatically reduce food packages for late pick-up. All food packages issued are for 30 days duration, even if picked up late.	Because of the flexibility provided by on-demand FI issuance, both Washington and Puerto Rico have chosen to not reduce food item quantities for late pickup.
Void/ reissue FIs	ISIS allows FIs to be voided and reissued when a participant changes preferred shopping location, when stock is damaged, or for stock with mismatched serial numbers. Lost or stolen stock is voided.	Yes, locals can void and reissue.	The system allows Food Instruments to be voided and reissued.	Clinics can void and reissue Food Instruments.	The system allows instruments to be voided and reissued. It also allows for stop payment if the client has lost his/her instruments.	Clinics can void or reissue FIs. FIs can be tracked by the client's name or by FI number.	WIN does have void/ reissue capabilities.	FIs may be voided and/or reissued - either by individual FI or an entire monthly set.
Create obligation based on FIs issued or redeemed	Obligations are created based on FIs redeemed. If there are problems, payments are held; California does not pay and chase.	Yes. A Not to Exceed (NTE) dollar value is determined based on the food package and the value of the known foods at that time. The NTE amount is 100% of the value of the foods and the vendor is not paid if the redeemed amount exceeds the 100%.	The system calculates daily obligation amounts and transmits issuance information to the contract banking agent daily.	Obligations are based on FIs redeemed.	The system transmits issuance information to the contract bank daily. The bank handles vendor payment and NTE associated problems.	WINDS automatically creates a vendor collection record if the amount redeemed on a FI is greater than the FI maximum amount.	WIN does create obligations based on the issued food packages.	Obligations are based on FIs redeemed in Washington.
Perform payment edits	The State Treasurer's Office system performs payment edits.	The vendor is not paid if the price submitted is over 100% of calculated value. State uses quarterly price survey by peer groups and locality.	The bank edits for checks that are over the estimated value.	The bank's system performs payment edits.	The bank edits for checks that exceed the NTE value that WICSIS assigns to an instrument.	The bank does not do any FI prescreening; payment issues are caught during reconciliation.	WIN does perform payment edits at the state level.	Although Washington and Puerto Rico use different formulas, both calculate a Not to Exceed (NTE) value for each food instrument which is printed on the face of the FI. In both programs, the banking contractor edits for checks that exceed the NTE amount.
Reconciliation of redeemed FIs to issued FIs	Redemption data are run through ISIS daily. The State Treasurer's Office (STO) provides a summary of daily redemption activities. Reconciliation is performed by State staff using STO and ISIS data.	All checks are reconciled 100%. Viking PDA is the processor that does the reconciliation.	The bank reconciles the food instruments. The state has inquiry capability for viewing issuance and reconciliation information.	An issuance file is sent to the bank. The bank performs checks (e.g., was the FI redeemed within the proper dates?)  The bank send results of edit checks to the state along with a redemption file.  The State does a reconciliation of their issuance data to the information provided by the bank.	Redemption data is fed to WICSIS daily from the banking contractor. WICSIS can produce monthly and yearly reconciliation reports for the entire state regions, and for each agency.	Agencies perform manual or electronic reconciliation. The agency uses a redeemed FI file from the bank and the outstanding FI report from WINDS to reconcile FIs.	WIN does a nightly reconciliation of all food instruments.  The system creates a pay file that is sent to the Fiscal Division. This Division then incorporates into a tape that is sent to the Comptroller who pays the vendor through a direct deposit into his/her account.	The banking contractor sends an electronic file of paid (and rejected) checks to the central processing site. The central processing site sends an issuance (and voided) checks file to the banking contractor. The WIC system auto-voids issued checks that have not been paid within 90 days of issuance.
Additional Food Benefit Issuance and Payment Characteristics	ISIS allows clinic staff to record Farmer's Market coupons issued to clients.			Clerks have the discretion to spread food items for one benefit month over many checks or placing all food items on a single check.  If hand written (manual) checks need to be issued, the WIC application can track them.	WICSIS allows clinic staff to produce Farmer's Market Coupons for clients.  WICSIS allows users to review benefit history.  WICSIS allows for the creation of system generated and reconciled manual checks for use during emergencies. The checks are assigned to clients in the system after the emergency has passed.  WICSIS automatically assigns food items over a number of checks in an equitable manner. The algorithm for assignment is based upon the number of shopping visits requested per month.  WICSIS allows the user to preview food instrument data before accepting.  The default food packages are table driven and easily editable.			In Puerto Rico, an additional step is required. Vendors deposit FIs in a temporary bank account. These deposits are reported to the WIC system as "paid" checks. The WIC system calculates deductions from infant formula checks and instructs the WIC bank via ACH to distribute the deposits between the vendor's bank account and a central formula account. At the end of the month, the WIC system issues infant formula coupons to vendors equal to the amount that was deducted from deposits during the month.

	California ISIS	Illinois	New Jersey	New Mexico	New York	Regional ITO WINDS	Texas WIN	Washington/ Puerto Rico
<b>Scheduling</b>								
Create master calendar	Local Agencies have the ability to set schedules and create appointment type through access to local tables.	The system allows each local agency to build it's own set of calendars - up to 99 ways that a calendar can look.	The master calendar is built at the Local Agency administrative site and automatically distributed to service sites. It is printable.  The master calendar can be built up to one year in advance and changed as needed.  The graphical master calendar shows holidays, and business days and hours on screen.  The master calendar allows the service site to define business days and hours, group education classes, and appointment availability slots.	Clinics create their own master calendar.  Clinics can assign resources (staff, TV, VCR, classroom space, etc.) to classes.  Staff can copy or repeat additions to the calendar.  Calendars are color and graphically coded.  Staff can view multiple calendars.  Staff can filter by appointment type.	The master calendar is a template that an agency can construct once and then apply in perpetuity, easing the burden of scheduling significantly. The calendaring template can be applied for up to one year. Modifications to the schedule, once applied, are easily made to the actual schedule. Much like MS Outlook, these changes can be rolled across the rest of the calendar automatically if desired.	Users have no need for a master calendar.	WIN will create a calendar for the local agency based on day, timeframe and type of appointment.	The system is built around a powerful, graphic appointment book at each clinic. WIC clinic staff use a staff calendaring utility based on weekly templates to identify available time for each staff person - usually for three months in the future. This available time is then graphically represented on the appointment book display.
Schedule appointments	ISIS has a scheduling component that allows staff to schedule appointments.	The system allows the locals to set appointments however they want to. It allows them to blank out space for walk ins. (The one ability the locals want is to be able to provide "first available appointment".)	The scheduling system is very flexible; but staff can only schedule for clients within their clinic.  The system allows for overbooking.  The system allows families to be scheduled together.  The replication functionality allows a typical day to be replicated exactly to other days.  The copy functionality allows a typical date range for a service site to be copied exactly to another service site.  Users can define appointment types.  Default duration for appointment types can be set at each service site.  The scheduler automatically detects required appointments (e.g., check pick up) for household members.  When manually scheduling appointments, staff can see a graphical display of open slots.  If an appointment is cancelled the slot is freed to allow scheduling of another client.	Appointments can be scheduled by family or individual.  Classes can be scheduled to the minute.  A number of available slots are set up for each class. Slots are decremented as clients are placed in the class.  When the class reaches maximum capacity a warning appears. Clients can still be added to a full class.	Staff can schedule clients within their own agency. · Overbooking is accommodated. · Both individual and family appointments as well as unrelated group contacts can be scheduled. · The schedule is graphical, much like lotus scheduler or MS Outlook. · User and Site schedules are easily replicated through scheduling templates. · Where applicable the system tracks whether next visits have been scheduled prior to check printing. · Appointment types and duration are definable. · Cancellations and rescheduling are fully supported.	Appointments can be scheduled through the NE/ CONTACTS screen within WINDS. There is also an external scheduler that is rarely used.  Most clients are seen on a walk in basis only and receive individual counseling; the clinics do not have prescheduled group classes.	Appointments can be scheduled for a clinic within that clinic only.	The appointment book is family based, although individual family members may be left out of an appointment.  Overbooking is allowed. The appointment book is integrated with nutrition education classes.  New appointment types are defaulted based on the care plan for each client.
Track appointment disposition	ISIS does not specifically track appointments. However, it does indirectly through tracking no-shows for check pick-up.	This can be tracked through the actual service screen.	The system automatically marks "kept appointments" (for initial certification, check pick up, etc.). Appointments can be manually marked as "kept".	Clerks track whether or not a client attends class. Staff capture rescheduled appointment data in comments.	The system tracks appointment disposition and will perform a variety of actions based upon disposition.	WINDS does not track appointment disposition.	WIN does not track appointment disposition.	When a WIC service has been completed using a service "wizard" a client's appointment for the day is automatically marked as completed.  A No Show Management wizard is used at the end of the day to mass produce No Show letters.
Generate appointment reminder notices	ISIS generates appointment reminder forms. Local Agencies have the ability to tailor the reminder form.	No. However, the system can print mailing labels that are used to remind people of classes, etc.	The system can generate appointment reminder notices on demand or in a batch process.  The system can produce reminders for normal and rescheduled appointments.  The system can produce missed appointment notices.	The WIC application can generate appointment reminder notices on demand. Additionally, appointment reminders automatically print on checks.	On demand and batch. Reminders and missed appointment notices are generated. The user also has the option of generating a missed appointment report every morning.	WINDS can generate printed reminder notices.	WIN will produce reminder notices to clients when prompted by the worker. For instance, a worker can ask the system to print notices and labels for all persons with appointments on a certain date.	The appointment book client detail lets clinic staff check off standard documentation types that the family should bring to their next appointment, such as income documentation.  A push button generates an appointment notice for the family, listing each client and the associated paperwork that they should bring.
Tie appointment to the client's preferred language	Preferred language is tied to appointment types.	No.	Staff can schedule appointments according to preferred language.	Language information is collected and the nutritionist or clerk uses that information to determine the class type for which the client should be scheduled.	Yes.	Language data is collected with demographics, but it is not tied to any other fields.	A client's preferred language is collected, but that data does not determine how WIN schedules appointments; staff do this manually.	The primary language for a family is recorded when a family is enrolled. Clinic staff use a generated report to schedule interpreters.



	California ISIS	Illinois	New Jersey	New Mexico	New York	Regional ITO WINDS	Texas WIN	Washington/ Puerto Rico
Tie appointment to the client's preferred time and day	ISIS does allow clients to choose an appointment day and the time of day.	This isn't being done, but the system could do it.	The system does not automatically schedule based on preferred date and time.	Preferred appointment day and time are kept in the client's history, but are not used by the system to schedule appointments. Clerks or nutritionists use that information when scheduling classes.	Not currently.	Client's preferred day and time for appointment is not captured because most clients are served on a walk in basis.	A client's preferred time and day are collected, but that data does not determine how WIN schedules appointments, staff do this manually.	The appointment book includes a search feature that finds the next available appointment that meets selected criteria (day of week, AM/PM, etc.).
Schedule appointments for other clinics or other health programs	ISIS does not allow for WIC to schedule appointments for other clinics or programs.	The system does not allow for WIC to schedule appointments for other clinics or programs.	Appointments for satellite service sites can be scheduled from the main site. Specific days can be checked out to a satellite site for scheduling, while others are checked out to the main site.  The New Jersey system cannot schedule appointments for other programs.	Clinics can set up appointment types for other programs. Because the WIC application is an open system other programs can access this information, but this functionality is not currently being used.	Appointments for any clinics within an agency can be made from a user's desktop or laptop. This could be easily broadened if desired.		WIN does not allow clinics to schedule for other clinics or other programs.	Washington staff schedule MSS appointments. Puerto Rico WIC is not integrated with other programs.
Additional Scheduling Characteristics	ISIS generates a file used by an Autodial system to contact participants by telephone with appointment reminders.		The system has a Reschedule Block of Appointments feature that allows all scheduled appointments to be moved to another date and time and/ or another service site.  Subsequent certification appointments can be scheduled for all participants due within a specific date range.		The system supports a full set of reminders and notices.  Vendor appointments for training and monitoring can be scheduled.			A utility is provided that allows a block of appointments to be moved from one staff to another.
<b>Reporting</b>								
Generate standard reports	Standard reports are generated through ISIS and the adjunct WICinfo.	The system does print standard reports such as "participation by priority and category" and an "education summary"	The system creates some standard reports, such as Appointments Due or Participant Summary.  Stage 2 of the system is envisioned to provide for 15 additional reports. Presently, there is a resource and memory issue at the locals that impedes them from calling up reports.	All reporting is done through the WIC application. Standard reports can be run from the State or clinic level. Reports can be run for individual clinics groups of clinics, or statewide.	All WICSIS reports can be generated by users with the correct security access at the agency level.	There are various standard reports, including the VAMP report, set up in WINDS. These reports can be previewed on screen or printed.  WINDS includes some graphing reports, including the food pyramid graph (by participant), which is a bar graph that shows levels of food consumption by food group.  The 498 report is the only report that populates information in an Excel spreadsheet for analysis.	Standard reports can be run from WIN.	The system provides over 100 reports including those required by FNS, for managing caseload, and to provide other operational assistance to central office and clinic managers.  Many reports use a "summarize and store" technology. At the end of each month, data is summarized and stored as intermediate data. These intermediate data are automatically distributed to clinics and the central office. Data is summarized by clinic, agency, county, and statewide. Data is unduplicated above the clinic level. Clinics can be clustered into arbitrary groups for summarization as well - crossing agency and county boundaries. Some reports are available using a browser interface.
Generate ad hoc reports	California is implementing a data warehouse project. It is separate from ISIS and WICinfo. The data warehouse uses various software packages and ISIS data (e.g., WICinfo).	Foxtire, a software package, will allow the creation of ad hoc reports. Every server at 257 sites has Foxtire.	The system does not create ad hoc reports at this time, but staff can run these reports through Crystal Reports.	Clinics can run ad hoc reports through MS Access and Crystal Reports, among other applications. The ability to run ad hoc reports is based on the skill level of the clinic staff.  The State will run ad hoc reports from clinics, if necessary.	An ad-hoc report generator has been created for NYS but not yet implemented. The report generator will limit users to only approved views of the database.	The agency system administrator creates ad hoc reports centrally. Most ad hoc reports eventually become standard and are distributed to all agencies.	WIN can create ad hoc reports through the software, Foxtire.	Ad hoc report services are provided on demand by the database administrator.
Maintain data warehouse	California is implementing a data warehouse project. It is separate from ISIS and WICinfo. The data warehouse uses various software packages and ISIS data (e.g., WICinfo).	There is not a data warehouse by definition; however, the central office maintains a repository of information. The Department of Human Services has a data warehouse, but it is not being used.	New Jersey does not maintain a data warehouse.		NYS does not maintain a data warehouse.		Texas does not maintain a data warehouse.	It was determined in both Washington and Puerto Rico that a data warehouse was not cost effective.
Additional Reporting Characteristics				Federal reports are set up in Federal format and can be printed from the WIC application.				
<b>Caseload Management</b>								
Allocate caseload	Caseload is allocated using participation data from ISIS.  Participation allocation is tracked on an Excel spreadsheet.	Caseload is allocated manually.	Caseload allocations are figured annually and adjusted monthly.	Caseload allocation is a human decision based on caseload and participation reports from the WIC application, as well as information contained on spreadsheets. The WIC application contains a data field for caseload allocation.	Caseload is allocated based upon caseload reports. It is adjustable on a monthly basis if necessary.	WINDS does not have any caseload management functionality.	WIN does not allocate caseload.	Caseload is allocated manually. Allocation values are stored in the system to enable some reports.
Monitor caseload	Caseload is not recorded in ISIS. However, State WIC monitors caseload using participation data from ISIS.	The system can monitor caseload, but this function is not being used. Caseload monitoring is done through a separate reporting system.	The system monitors caseload.	Caseload reports from the WIC application are used to monitor caseload.	The system monitors caseload using both numbers and graphically.	WINDS does not have any caseload management functionality.		WIC monitors caseload using standard participation reports.

	California ISIS	Illinois	New Jersey	New Mexico	New York	Regional ITO WINDS	Texas WIN	Washington/ Puerto Rico
Perform "what if" analysis	ISIS does not perform "what if" analyses; however, information used from ISIS is used for this purpose. The WIC data warehouse has the capability to perform "what if" analysis using ISIS data that is extracted monthly.	No. The system does not perform "what if" analysis.	There is extensive "what if" analysis capabilities.	The WIC application alone does not support "what if" analyses, but the State uses a combination of WIC application reports, data kept in spreadsheets, and human interaction to perform these analyses.	WICSIS performs analysis around predictive additions and deletions as well as year to year comparisons of caseload.	WINDS does not have any caseload management functionality.	WIN does not perform "what if" analyses.	What if analysis is supported by on-demand ad hoc reports.
Maintain waiting list	There is no functionality in ISIS for waiting lists. If waiting lists were needed in the future, a program would be written.	The system can maintain a waiting list, however, they have not had to use it.	The system can maintain a waiting list, but has not needed to since it was built.	The WIC application supports wait list functionality. Based on state and clinic policy, staff use a waitlist report (including priority and program category detail) to determine the order from which participants are pulled from the waitlist.	WICSIS can maintain waiting lists. The functionality has never been used.		WIN does not have the function to create and maintain waiting lists.	Washington does not use waiting lists. Puerto Rico system has a fully functional waiting list facility that automatically places applicants on the waiting list, and orders the list by first in first served by priority.
Additional Caseload Management Characteristics					Printable graphs are available.			
<b>Vendor Management</b>								
Generate automated VAMP/ TIP reports	There is no automated VAMP reporting functionality in ISIS. The TIP reports are partially automated. Information from WICinfo that is maintained in ISIS and required for the TIP report is automated.	There is a special Vendor Management System that is considered to be a sub-system of Cornerstone. Data from the WIC system is fed into the Vendor Management System.	The system can produce TIP reports.	The WIC application generates both VAMP and TIP reports.	The system does not currently produce the TIP report.	WINDS automatically generates the VAMP report. This report was designed just before the TIP report was introduced.	WIN does not generate automated VAMP/TIP reports. The Vendor unit uses a subsystem that uses information from WIN to create these reports.	The system automatically generates VAMP/TIP extract files.
Maintain vendor over-payment and billing subsystem	There is no overpayment system because vendors who submit checks for redemption over 100 percent of the value are no paid above value.	There is no overpayment system, since vendors who submit checks for redemption over 100% of the value are not paid.		The bank maintains this functionality.	The bank vendor maintains this functionality.		WIN tracks overpayments, but doesn't aggregate this data.	In Washington, over-NTE amount checks are rejected. In Puerto Rico, overages are deducted from deposited checks. Neither Washington or Puerto Rico require billing of vendors.
Track vendor food prices	Food prices are tracked and maximum prices are updated as dictated by the market.	The VM system tracks vendor shelf prices.	Prices are tracked quarterly through a sample of vendors by peer group.	The vendor record within the WIC application holds vendor price information. Vendors submit price update forms regularly.	Food prices are tracked and recorded during monitoring visits.	WINDS captures vendor shelf prices on the FOOD PRICE tab of the vendor data screen.	Vendor food prices are not tracked in WIN.	The system tracks vendor food prices which are used to calculate Not-to-Exceed (NTE) amounts for food instruments.
Support peer group pricing analysis	Currently, California does not band vendors. Maximum prices are set by a statewide analysis of maximum prices. California is developing a Peer Group reimbursement system.	The VM system aligns shelf prices by peer group by region (9 regions).	The system supports peer group pricing.	The WIC application supports automated peer group analysis.	Pricing is based upon regional peer groups. WICSIS also has the ability to send redemption data to FAMS, an external price analysis tool used by the State. With FAMS, pricing can be broken down into lower level peer groups as is necessary.	WINDS has the capability to track peer groups, but the agencies do not use it because they only have a small number of vendors.	Peer group analysis is performed outside of WIN.	Washington does not use peer group pricing. The Puerto Rico system supports a regional peer group pricing strategy.
Provide automated vendor risk assessment	Data from ISIS are used to produce reports for vendor risk analysis.	The VM system assesses vendors for high prices, low variance in price of redeemed vouchers, large percentage of vouchers redeemed for the same price and vouchers accepted outside of valid dates.		The WIC application can produce a report of high-risk vendors. The report is based on algorithms determined by the State.	WICSIS displays information concerning high price and low volume vendors. FAMS maintains other vendor analysis.	WINDS can generate a high-risk vendor report (based on high prices, low variance in price of redeemed vouchers, large percentage of vouchers redeemed for the same price, vouchers accepted outside of valid dates, vendors with 10 or more sanction points).	Vendor risk assessment is performed outside of WIN.	The Puerto Rico system provides extensive automated vendor risk assessment based on volume, price variance, and other system data.
Track vendor authorization	Vendors are not entered into ISIS until they have been authorized. However, authorization status is tracked in ISIS.	If the vendor meets the state's criteria, they can become a vendor. Vendors have been reduced from approximately 3000 to 1600.	Vendor authorizations are tracked in the system.	The WIC application tracks vendor applications and authorizations.	Vendor applications, authorizations, and all subsequent contracts are tracked within WICSIS. The system also tracks training and monitoring associated with those contracts.		WIN lists the vendors, but does not specifically tell when vendor authorizations are due. It does have ability to suspend payments to vendors when they are suspended from the program.	The system tracks key events during the authorization process.
Track vendor compliance and sanction history	Vendor sanctions and history are kept on paper; this information is not kept in ISIS. The functionality to keep vendor sanctions and history is available in MS Access. These data will be built into the functionality of the WIC Data Warehouse. The ability to track vendor monitoring activities will be built into the functionality of the WIC Data Warehouse.	Vendors are targeted based on points scored through risk factors.	Vendor compliance history is logged and kept in the system.	The WIC application holds vendor compliance and sanction data. The WIC application was built to support the storage of sanction data for other programs.	Vendor compliance and sanctions are tracked within the system. Fines (and payment schedules), recoupment, and disqualifications are tracked as well.	WINDS has a SANCTION tab (calculates points, details sanction and appeal status, indicates if FSP was notified) and COMPLIANCE tab (tracks monitoring activities and violations) on the vendor data screen.	Vendor compliance and sanction history is tracked outside of WIN.	The system tracks detailed information about compliance, investigation findings and sanctions.
Automatically calculate vendor sanction points	ISIS does not have functionality to automatically calculate sanction points.	The system does not accumulate points for the purpose of giving sanctions.			No	WINDS automatically calculates sanction points on the SANCTION tab of the vendor data screen.	WIN does not automatically calculate vendor sanction points.	The Puerto Rico system automatically calculates sanction points.
Track vendor education	ISIS tracks last date education was provided to vendors.	The system does track education provided to the vendors.	Vendor education is tracked. Letters are generated to vendors that miss their first training session. Violations are documented for vendors that miss their second training session.	The WIC application tracks vendor education, including classes and pamphlets/ materials given.	Vendor education is fully supported.		WIN does not track vendor education.	The system tracks vendor education events.

	California ISIS	Illinois	New Jersey	New Mexico	New York	Regional ITO WINDS	Texas WIN	Washington/ Puerto Rico
Track vendor complaints	ISIS does not have functionality to track complaints against vendors.	No. Complaints are filed in the vendor's file.	Complaints against vendors are logged.	The WIC application contains a general complaints component. It can be used for complaints against vendors, participants, clinic staff, etc. This component captures the complaint, who it is from, who it is against, and the outcome.	Complaints and outcomes are tracked in WICSIS.	The NOTES/ COMPLAINTS tab of the vendor data screen captures complaint detail, date, and who made the complaint (participants, clerks, or other vendors).	WIN does not track vendor complaints. This is done through a separate database system.	The system provides displays for entering complaints about vendors at both the clinic and central office. The central office has a comprehensive tool for following up complaints and ensuing investigations.
Coordinate with the Food Stamp Program	ISIS captures FSP ID numbers. ISIS doesn't communicate with USDA FSP in an automated manner.	There is a dialogue with the USDA FSP Field Office in Springfield. The state is also attempting to utilize the STARS Report.	The New Jersey WIC program collects Food Stamp number from vendors.	The WIC application stores sanction data from the Food Stamp Program.	WICSIS supports a food stamp interface with STARS. The interface allows for the loading of FS vendor data into WICSIS to be used if an FS vendor wishes to become a WICSIS vendor.	WINDS tracks notification of sanctions to the FSP.	WIN does not coordinate with FSP. State uses their subsystem to create TIP report and also uses the USDA Stars report.	Coordination with Food Stamps is not required in Washington or Puerto Rico.
Produce vendor inventory and price reports	ISIS does not produce a vendor inventory or price reports. The ability to track vendor monitoring activities will be built into the functionality of the WIC Data Warehouse.	The system does not produce a vendor inventory or price reports.	The system can produce price reports based on various criteria.		FAMS is used to produce price reports.		WIN does not produce a vendor inventory or price reports, but can average prices for certain food items and can query system for food items.	The system provides vendor price reports. Neither Washington or Puerto Rico track vendor inventory.
Generate and track notices/ letters to vendors	ISIS does not produce vendor letters or notices, however, a PC subsystem does.	Can produce up to 30 different letters covering various subjects.	Personalized vendor letters are produced at the State Office.	The WIC application can automatically generate letters/ notices based on user input (i.e., staff must initiate the process and then the application generates letters/ notices for all vendors who are due to receive the information.).	Personalized vendor notices can be produced at both the agency and state levels.		WIN does not produce vendor letters or notices; however, this is done through a semi-manual process.	The system tracks selected notices to vendors. Vendor managers may also record notes about complaints, investigations, sanctions, and findings.
Provide WIC payment summaries to vendors	ISIS does not provide WIC payments summaries to vendors.	The WIC system does not provide payment summaries to vendors; however, the state can track redemptions by vendors for WIC purposes. This information is garnered from the bank.		The WIC application does not provide payment summaries to vendors.	WICSIS does not provide payment summaries.		WIN can produce a summary of what's withheld by claim. It could produce summaries to vendors is so requested.	This was not a requirement in Puerto Rico or Washington.
Additional Vendor Management Characteristics	The ability to track vendor monitoring activities will be built into the functionality of the WIC Data Warehouse.			The WIC office can issue checks to vendors if, for some reason, the bank cannot pay the vendor.	WICSIS vendor applications are processed much like client applications. WICSIS determines vendor eligibility for WIC based upon the data which has been entered. If WICSIS allows a vendor on to the system then there is no question that they are qualified. Overrides are allowable in the case of geographical need.			
<b>Operations Management</b>								
Maintain list of contacts for outreach activities	ISIS does not maintain a list of outreach contacts.	These contacts are developed and maintained locally. They can be housed in Cornerstone.	The system allows local agencies to build outreach databases with name, address and phone number.	The WIC application maintains a list of contacts for outreach activities. IT also contains a printable list of contacts for referrals.	WICSIS maintains local agency contacts based upon roles. These roles are easily expanded or contracted through reference tables.	WINDS does not maintain a list of contacts for outreach activities.	WIN does not maintain a list of outreach contacts.	Central office or clinic staff can enter community activities with an associated number of education hours. The clinic application allows staff to mark participant attendance at these events.
Maintain client opinion survey data	ISIS does not maintain client survey data.	The WIC system does not maintain client opinion survey data.	The system allows for up to 6 State defined and up to 6 Local Agency defined survey questions per participant to be used.	Client opinion survey data are kept in the WIC application.	WICSIS does not maintain client opinion survey data.	WINDS does not maintain client opinion survey data.	WIN does not capture client opinion survey data.	Clinic staff are provided a utility for creating client surveys for a particular period and for specific client categories. A display on the desktop window is used by clinic staff to query clients (or caregivers) and record survey results.
Maintain local agency/ clinic data	Local agencies are responsible for maintaining their own appointment type and schedules, nutrition education plans, check stock inventory, and print set up.  Local agency/clinic data (e.g., address, phone numbers, etc.) are kept in ISIS.	The local agencies maintain all clinic data locally. The state can centrally upload a subset.	Clinic defaults, codes, and logs are maintained at clinics.	Clinic data (address, phone and fax numbers, staff, participation counts, hours of operation, etc.) are kept in the WIC application.	The following Agency/clinic data is maintained: · Address · Contract Info · Physical Plant info · Budget information · Assigned caseload · Contact information · Hours of operation · Schedule · Services offered · Waitlist information		Clinic data is maintained at the local level.	The system maintains demographic and staff information associated with each agency and service location. System codes and lookup table values are maintained at both the central office and clinic level.
Maintain serialized inventory	Serialized food instrument stock (i.e., check stock) inventory information is kept in ISIS.	No. Just Food Instrument stock.	The system maintains data on serialized check stock.	The WIC application contains an inventory function that can maintain any type of inventory the clinic desires (including serialized stock and non-serialized items, like desks, toner cartridges, or breast pumps).  New Mexico uses this functionality statewide to track serialized card stock inventory.	No.	WINDS does not maintain serialized inventory because vouchers are not printed on serialized stock.	Serialized inventory is captured in WIN. This includes Food Vouchers and Food Exchange vouchers (FEX).	The system prints checks using MICR technology, generating serial numbers at the time checks are printed. Small quantities of pre-printed serialized "handwritten" checks are maintained at clinics to be used in the event of power outages. The system records the inventory of handwritten checks.

	California ISIS	Illinois	New Jersey	New Mexico	New York	Regional ITO WINDS	Texas WIN	Washington/ Puerto Rico
Maintain non-serialized inventory	Non-serialized inventory information is not kept in ISIS.	The WIC system does not maintain non-serialized inventory data.	The WIC system does not capture non-serialized items - these are captured through an ACCESS system in the State office.	The WIC application contains an inventory function that can maintain any type of inventory the clinic desires (including serialized stock and non-serialized items, like desks, toner cartridges, or breast pumps).	Non-serialized inventory information is not kept in WICSIS.	WINDS provides a reminder of when to order new stock based on vouchers printed.	WIN does not maintain non-serialized inventory data.	The system does not record non-serialized inventory.
Additional Operations Management Characteristics				Auditors can log in remotely to clinic servers to access data for audit purposes. They do this on a scheduled and ongoing basis.				
<b>Financial Management</b>								
Track local/ state budget	ISIS does not have any budget functionality. Most of the functions described in the Financial Management section will be built into the WIC Data Warehouse.	No. This is done through a separate system.	No. This is done through a separate system.	The WIC application tracks both the state and local budgets.	Yes. The financial management subsystem allows tracking of budgets. The subsystem is probably not easily transferable however.	WINDS does not contain an accounting component for the administrative life cycle.	WIN does not have any budget functionality.	No. This is done through separate accounting systems.
Produce automated rebate report based on amount issued or redeemed	ISIS does not produce an automated rebate report, but ISIS data are used to prepare the rebate invoice. When rebates are calculated it is assumed that all FIs are fully redeemed. A small nonredemption factor is built into the contract.	This report is produced by the mainframe in Springfield.	The system does produce automated rebate reports.	The WIC application generates a rebate report based on amount issued.	The systems produces an automated rebate report.		Automated rebate reports are produced at the State level through WIN.	The system generates Infant Formula rebates reports.
Produce automated report of redemption by WIC vendor	WICinfo produces reports displaying redemption data for vendors.	Both the WIC mainframe and the Vendor Management System can produce this report.		The WIC application generates a report of redemption by WIC vendor that includes voucher number, number of FIs on the voucher and maximum price.	FAMS produces this report.		WIN does not regularly produce reports of redemption by vendor, but it can.	The system includes a Redemption by Vendor report.
Track rebate payment	ISIS does not track manufacturer rebate information. ISIS provides redemption information used by State WIC to determine rebate payments.	The system provides the information needed to bill the formula company.	The system does produce reports that can track rebates.		Rebate payments are tracked outside of the system.	WINDS computes rebates based on voucher issue date and creates a manufacturer file for payments. Checks can be printed in batch or on demand.	WIN does not track rebate payments, does capture the payments received.	The system does not track payment by infant formula rebate vendors.
Allow rebate functions for items other than formula	ISIS tracks cereal and juice redemption. Both foods are provided on distinct, separate checks.	Illinois only has Infant Formula Rebates	New Jersey only has Infant Formula Rebates.		The system will support this. Currently it is only used for formula.		Texas has infant cereal rebates (in addition to infant formula rebates) with special code that is tracked by the WIN system.	The system is configured to support rebates for non-formula food types. Neither Washington or Puerto Rico allows rebates on non-formula food types.
Additional Financial Management Characteristics	Most of the functions described in the Financial Management section will be built into the WIC Data Warehouse.			The State can export files from the WIC application for use in other applications (like Excel or Lotus).				
<b>System Administration</b>								
Capability to update system tables	Local agencies and State WIC staff can update some system look-up/reference tables via ISIS screens. Other system look-up/reference tables are updated by the Database Administrator or programming staff as required by written request from State WIC Automated Management Section.	System tables are updated centrally and easily downloaded to local agencies.	Local agencies have the ability to update system tables.	Clinics do not have any local table update capabilities.	The State central staff has the ability to update system tables. Others could be granted these abilities through security.		Local agencies have limited system table update capability.	The system provides a utility to central office staff for most system table updates. Clinics may also update some values. Some tables may only be updated by operations staff.
Automated back up and recovery	ISIS does have automated back up and recovery capability. Disaster recovery is accomplished via offsite storage.	Every local server and the mainframe backs up information nightly.	There is automated back up and recovery capability.	The WIC application has automated, scheduled back ups. Automated recovery occurs whenever necessary.	Backup and recovery is server based.	WINDS does an automatic backup nightly. There is an option for manual back up, as well.	Fixed sites have an automated process for End of Day backups. Data packages are set in an outbound directory to send to the state. The State does a reindex of the database and purges data during end of day processes. The State performs a taped back up as well as a hard disk back up on networked computers.  The State dials in to non-fixed sites.  Portable sites dial in to the state when they can, preferably daily. Some sites cannot dial in this frequently.	The system provides for automated back up and recovery.
Control access to data based on function or field type	ISIS has function level security. The director or the state determines security level.  WICINFO has table level security.  PASSWORD is the only field level security in either system.	Data access is controlled through the customization of the workers needs to know. Control is by screens or functions.	Access is based on function.	Access to data is based on function.	WICSIS has advanced security capabilities. State defined security templates are assigned to users to regulate system access. Security can be applied to the control level offering a great amount of flexibility.	Security is based on function. Users are defined into categories. Each category limits the user to functions required for their job.	Access to data is based on function.	The system has an extensive application security function that creates user security groups. Each group can be granted different levels of access to each display. Users are assigned to groups and inherit the group's access rules.

	California ISIS	Illinois	New Jersey	New Mexico	New York	Regional ITO WINDS	Texas WIN	Washington/ Puerto Rico
Additional System Administration Characteristics	Every record created, as well as record adds and updates, is tagged with the user's logon ID, time, and date.			Every record created, as well as record adds and updates, is tagged with the user's logon ID, time and date.  Access attempts to the WIC application are time/ date stamped and the logon ID attempted is captured.  The WIC application provides reminders for users to change passwords, but does not require a change.	Password changes are enforced every thirty days though this value is adjustable.  Read only access is an available security parameter.  Security template assignments can be centrally managed if desired.			
<b>Miscellaneous</b>								
Availability of on-line system help	ISIS does provide some on-line system help.	The system provides help through an on-line user's manual. There are also pop-up screens for codes.	There is no on-line help capability.	General help is available through the help menu.	WICSIS provides on-line help.		There is no on-line help functionality.	The system has a comprehensive on-line help for all displays.
Availability of on-line WIC policy and procedure help	There is no on line WIC policy and procedure help.	No. The policy and procedures are not on-line, though this might happen in the future.	There is no on-line WIC policy and procedure help.	On-line WIC policy and procedure help is not available.	WICSIS provides on-line policy and procedures.	WINDS contains on line help for risk factors. Searches can be conducted by code or keyword and provide definitions cut off levels and other important information.	There is no on-line WIC policy and procedure help.	This feature has not been chosen by either Washington or Puerto Rico.
Access to code tables for look up	ISIS users can use function keys to look up codes.	The WIC system provides access to code tables through pop-up screens.	Drop down code lists and combo boxes are available for the lookup of non-intuitive codes.	Code lists are available for look up, but cannot be changed by clinic staff.	All codes are presented in plain English using drop down or combo boxes.		Picklists provide information code look up. Picklists are accessed through function keys.	The system uses very few codes. The GUI displays display actual descriptions in drop down lists or uses radio buttons.
Produce food purchase data to support food approval policy, product recalls, food cost, etc.	ISIS does provide food purchase data to support policy decisions.	The WIC system does not capture what people buy.	The system will produce data that will support policy decisions.	The WIC application does not capture any food purchase data.	The system produces data to support policy.		WIN does not provide food purchase data.	System does not have access to food purchase information.
Additional information/ Unique system features		There are edits in the food package assignment that warns of foods that are not appropriate for the category of individual.  As mentioned above, Illinois is the only (or one of the only) states to truly share information, through their computer system, with other health programs. The Cornerstone system is separate from the WIC system, but they interface along with seven other health programs.		One user can open multiple client records simultaneously.  Client records can be accessed from many screens by clicking on the client name (e.g., when looking at a family list in a mother's record, the child's record can be accessed by clicking on the child's name)  Multiple staff can work on the same client's record at the same time. If the same process is being performed (e.g., address change) the application provides notification that the record is in use elsewhere.  Client notes can be categorized by type.  Notice and letter templates are set up in MS Word. Information from the WIC application is merged into these templates.	Letter templates are MS Word based to ease maintenance.  A wireless network setup supports off site operations.  Report running tools are built into the application.  The manual check subsystem offers paramount flexibility and tracking ability when dealing with disaster.	WINDS automatically updates participant type when an infant turns 4 months old (so they receive a food package that contains cereal) and 1 year old (so they become a child, instead of an infant).  The participant screen title bar displays participant name, ID, priority, certification date, and date of last FI issuance.		